

APPLICATION FOR BUILDING PERMIT

COUNTY OF LOS ANGELES
DEPARTMENT OF COUNTY ENGINEER
BUILDING AND SAFETY DIVISION

1

FOR APPLICANT TO FILL IN			
BUILDING ADDRESS 1141 W. CARSON			
CITY CARSON ZIP			
SIZE OF LOT		NO. OF BLDGS. NOW ON LOT	
TRACT	BLOCK	LOT NO.	
OWNER BOYS MKTS	TEL. NO.		
ADDRESS ARROYO PARKWAY			
CITY PASADENA ZIP CA			
ARCHITECT OR ENGINEER J. KING EAGLES		TEL. NO. VNK	
ADDRESS 15217 BURBANK BLVD			
CONTRACTOR J. MALVER CORP. TEL. NO. 772-4821			
ADDRESS 607 LAIRPORT		LIC. NO. 289862	
CITY EL SECONDO, CA LIC. CLASS			
CONSTRUCTION LEADER NAME AND BRANCH			
ADDRESS		CITY	
SQ. FT. SIZE	NO. OF STORIES	NO. OF FAMILIES	CHECK ONE
DESCRIPTION OF WORK			NEW <input type="checkbox"/>
BUILD ROOF PLATFORM			ADD <input type="checkbox"/>
4 LEGGED FOR AIR COOLER			ALTER <input type="checkbox"/>
USE OF EXISTING BLDG. SUPER MARKET			REPAIR <input type="checkbox"/>
APPLICANT (PRINT)			DEMOL. <input type="checkbox"/>
BY (SIGNATURE)			
I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL ORDINANCES AND LAWS REGULATING BUILDING CONSTRUCTION. I CERTIFY THAT IN DOING THE WORK AUTHORIZED HEREBY I WILL NOT EMPLOY ANY PERSON IN VIOLATION OF THE LABOR CODE OF THE STATE OF CALIFORNIA IN RELATING TO WORKMEN'S COM- PENSATION INSURANCE.			
SIGNATURE OF PERMITTEE Paul Clement			
ADDRESS 607 LAIRPORT			
CITY EL SECONDO, CA TEL. NO. 772-4821			
VALUATION \$ 1400			

BUILDING ADDRESS 1141 WEST CARSON			
LOCALITY Carson			
NEAREST CROSS ST. Normandie			
ASSESSOR MAP BOOK		PAGE	PARCEL
DISTRICT 12	GROUP B2	TYPE CONST. V	FIRE ZONE 3
STATISTICAL CLASSIFICATION CLASS NO. 22 DWELL. UNITS 0		PROCESSED BY Bewley	
USE ZONE C4	MAP NO. 4209	SEWER MAP TR BK 55 PG 13	
SPECIAL CONDITIONS			
ROAD DEPARTMENT APPROVAL REQUIRED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
BLDG. SETBACK FROM FRONT PROP. LINE OF (STREET)			
HIGHWAY + YARD =	TOTAL SETBACK FROM FRONT PROP. LINE	TYPE OF HIGHWAY	EXISTING WIDTH
+	=		
BLDG. SETBACK FROM SIDE PROP. LINE OF (STREET)			
HIGHWAY + YARD =	TOTAL SETBACK FROM SIDE PROP. LINE	TYPE OF HIGHWAY	EXISTING WIDTH
+	=		
<input checked="" type="checkbox"/> CORNER CUTOFF YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
IN OPEN SPACE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
IN COASTAL PERMIT ZONE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
FINAL DATE 9-5-79 BY [Signature]			
P.C. Fee \$ 14.40		Permit Fee 18.00	
		Issuance Fee 7.00	
		Total Fee 25.00	

INSPECTOR COPY

PLAN CHECK VALIDATION

CK. M.O. CASH

623 JUN 8A23

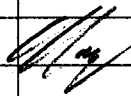
14.40

PERMIT VALIDATION

CK. M.O. CASH

624 JUN 8A01

25.00

PLANS TO APPLICANT					INSPECTOR'S NOTES	
TO:		RETURNED		APPROVED		
NO	DATE	NO	DATE			
APPROVALS		REQUIRED		DATE RECEIVED OR APPROVED		
		YES	NO			
WATER CERTIFICATE						
HEALTH DEPARTMENT						
FIRE DEPARTMENT						
GRADING						
GEOLOGICAL						
PEDESTRIAN PROTECTION (FENCE) (CANOPY)						
SPECIAL INSPECTION (CONC.) (MASNRY.) (WELDG.)						
LOT DRAINAGE						
PARKING						
APPROVALS	DATE	INSPECTOR'S SIGNATURE				
LOCATION- (SETBACK & YARDS)						
FOUNDATIONS						
FRAME						
LATH/DRYWALL INTERIOR						
LATH-EXTERIOR						
HOUSE NUMBER- CORRECT & POSTED						
FINAL- ENTER ON FRONT	9-5-78					

APPLICATION FOR ELECTRICAL PERMIT

1

COUNTY OF LOS ANGELES
DEPARTMENT OF COUNTY ENGINEER
BUILDING AND SAFETY DIVISION

FOR APPLICANT TO FILL IN

	EACH	NO.	FEE
New Residential Bldgs. & Pools			
1 & 2-Family, Sq. Ft. _____	\$.025	—	\$
Multi-family Sq. Ft. _____	.02	—	
Residential Swimming Pools	20.00		
Outlets: Rec. _____ Light _____ Sw. _____			
First 20	.50		
Total No. _____ Additional	.30		
Lighting Fixtures			
First 20	.50		
Total No. _____ Additional	.30		
Fixed Appliances Not Over 1 HP			
Range _____ Heater _____ D.W. _____			
Oven _____ Dryer _____ W.M. _____			
Top _____ FAU _____ W.H. _____			
Hood _____ Fan _____ Other _____			
Disp. _____ Room Air Cond. _____	2.00		
Power Apparatus & Large Appliances			
Size & Type HP, KW, KVA, or KVAR			
Up to 1 Incl.	2.00		
3-3 HP Over 1 to 10 Incl.	5.00	15.00	
Over 10 to 50 Incl.	10.00		
Over 50 to 100 Inc.	20.00		
Over 100	30.00		
Services			
0 - 200 Amp. Under 600 V	12.50		
201-1000 Amp. Under 600 V	25.00		
Over 1000 Amp. or Over 600 V	50.00		
Temp. Power Pole & Appurtenances	10.00		
Sign with One Branch Circuit	10.00		
Additional Sign Branch Circuits	2.00		
Misc. Conduits & Conductors	15.00		
Other (See Complete Fee Schedule)			
PERMIT FEE (Sub-Total)			
PLAN CHECKING FEE (One-Fourth Permit Fee)	7.00		
PERMIT ISSUING FEE	7.00		
TOTAL FEE			22.00

JOB ADDRESS	1141 W. CARSON AVE	
LOCALITY		
NEAREST CROSS ST.	BUDLONG	
OWNER OR FIRM NAME	BOYS MARKETS	
MAIL ADDRESS	1030 S ARROYO PARKWAY	
CITY	PASADENA Tel. No. 682-3931	
PLAN CHECK APPLICANT		
ADDRESS		
CITY	Tel. No.	
PERMIT APPLICANT	B.F.B. ELECTRIC SERVICE	
ADDRESS	3036 TREADWELL ST	
CITY	LOS ANGELES Tel. No. 2584181	
LICENSE OR REG. NUMBER	259 848 Class C10	
I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING ELECTRICAL WIRING.		
I HEREBY CERTIFY THAT I AM PROPERLY REGISTERED AND/OR LICENSED AS REQUIRED BY LOS ANGELES COUNTY AND STATE OF CALIFORNIA OR THAT I AM THE LEGAL OWNER OF THE ABOVE DESCRIBED RESIDENTIAL PROPERTY.		
PERMITTEE SIGNATURE	[Signature]	
DISTRICT NO.	12	PROCESSED BY Carlene
APPROVALS	DATE	INSPECTOR'S SIGNATURE
TEMP. POWER POLE		
UNDERSLAB WORK		
ROUGH CONDUIT		
WIRING	9-5-74	[Signature]
FIXTURES		
POWER AUTHORIZED		
UTILITY CO. NOTIFIED		
FINAL	9-5-78	[Signature]
NOTES		

INSPECTOR COPY

PLAN CHECK VALIDATION

CK.

M.O.

CASH

PERMIT VALIDATION

CK.

M.O.

CASH

1562 JUN 26 A 65

22.00

SEE BACK OF APPLICATION FOR COMPLETE SCHEDULE

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APPLICATION FOR PERMIT HEATING - VENTILATING - AIR CONDITIONING

1

BUILDING AND SAFETY DIVISION

FOR APPLICANT TO FILL IN (PRINT OR TYPE ONLY)

NO.	TYPE OF APPLIANCE OR EQUIPMENT	FEE
	ABSORPTION UNIT, BTU _____	
	AIR HANDLING UNIT, CFM _____	
	BOILER, BTU _____	
	COMPRESSOR, BTU _____	
	VENTILATION SYSTEM _____	
	EVAPORATIVE COOLER _____	
	FURNACE: FAU _____ GRAVITY _____ FLOOR _____ BTU _____	
	HEATER: SUSPENDED _____ UNIT _____ WALL _____	
1	ALTERATION AIR COOLED CONDENSER ON ROOF 500,000 BTU	20 00
Plan check fee 25% of above.		
PERMIT ISSUING FEE \$		2 00
TOTAL FEE		22 00

PLAN CHECK APPLICANT

NAME

ADDRESS

CITY

TEL. NO.

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL ORDINANCES AND LAWS REGULATING HEATING, VENTILATING, AIR CONDITIONING.

I HEREBY CERTIFY THAT I AM NOT ACTING IN VIOLATION OF CHAPTER 9, DIVISION 3, OF THE BUSINESS AND PROFESSIONAL CODE OF THE STATE OF CALIFORNIA.

SIGNATURE OF PERMITTEE

PLAN CHECK VALIDATION

CK.

M.O.

CASH

BUILDING ADDRESS	1141 WEST CARSON
LOCALITY	TORRANCE
NEAREST CROSS ST.	CARSON + VERMONT
OWNER	BOY'S MARKETS
MAIL ADDRESS	1030 50 ARROYO PKW
CITY	PASADENA
TEL. NO.	213 682-3931
CONTRACTOR	HUSSMANN L.A.
ADDRESS	14700 ALONDRA
CITY	LA MIRADA
TEL. NO.	994-6400
STATE LICENSE NO.	266672
LIC. CLASS	C-38

DISTRICT NO.

GROUP

ZONE

PROCESSED BY

12

B2

C4

Carlene

INSPECTION RECORD

INSPECTOR COPY

APPROVALS

DATE

INSPECTOR'S SIGNATURE

ROUGH

FINAL

4-5-78

Hoy

PERMIT VALIDATION

CK.

M.O.

CASH

9752 JUN 21 A 4 1

27.00